



PTO/SB/21 (09-04)

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

8

Application Number 10/627,553

Filing Date July 24, 2003

First Named Inventor Anthony Ross

Art Unit 3732

Examiner Name TBD

Attorney Docket Number 044RE1

ENCLOSURES (Check all that apply)

- | | | |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to TC |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Change of Correspondence Address | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | 1. Statement Under 37 CFR 3.73(b) |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | 2. Return Postcard |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | 3. REISSUE CONSENT OF ASSIGNEE |
| <input checked="" type="checkbox"/> Reply to Missing Parts/Incomplete Application | <input type="checkbox"/> Landscape Table on CD | |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | | |

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	NuVasive, Inc.		
Signature			
Printed name	Jonathan Spangler		
Date	January 16, 2006	Reg. No.	40,182

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

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Typed or printed name Jonathan Spangler

Date January 16, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT
Application Serial No. 10/627,553
Attorney Ref. No. 044RE1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Patent Application of)
)
Anthony Ross, et al.)
) Group Art Unit: 3732
)
App. Ser. No. 10/627,553)
) Examiner: TBD
Filed: July 24, 2003)
)
For: METHOD FOR TREATING AN)
INTERVERTEBRAL DISC)
)
)
)
)

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Signature: _____

Jonathan Spangler

RESPONSE TO NOTICE TO FILE MISSING PARTS

Mail Stop Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir or Madam:

In response to a Notice to File Missing Parts mailed on November 14, 2005, having a two-month period for response that expires January 14, 2006, the applicant respectfully submits the following:

- (A) A copy of the Notice to File Missing Parts;
- (B) A consent of assignee as required by the Notice to File Missing Parts; ~~and~~
- (C) A STATEMENT UNDER 37 CFR 3.73(b); AND**
- (D) A copy of an executed assignment.

No fees are deemed necessary at this time. However, in the event that there are any fees to be charged, the applicant hereby request that any charges be made to Deposit Account No.: 50-2040 for Customer No.: 30,328. In the event that there are any questions concerning the remarks above or the application in general, the Examiner is cordially invited to telephone the undersigned attorney so that prosecution may be expedited.

Respectfully submitted,
NUVASIVE, INC

By: _____

Jonathan Spangler, Esq.
Registration No. 40,182

4545 Towne Centre Court
San Diego, CA 92121
Tel.: (858) 243-0029

January 16, 2006

IFW



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
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APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/627,553	07/24/2003	Anthony Ross	044RE1

30328
 JONATHAN SPANGLER
 NU VASIVE, INC.
 4545 TOWNE CENTRE COURT
 SAN DIEGO, CA 92121

CONFIRMATION NO. 3530
 FORMALITIES
 LETTER

Date Mailed: 11/14/2005

NOTICE TO FILE MISSING PARTS OF REISSUE APPLICATION

Filing Date Granted

An application number and filing date have been accorded to this reissue application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- Consent of assignee is missing. 37 CFR 1.172 requires that a reissue oath/declaration be accompanied by the written consent of all assignees.

Replies should be mailed to: Mail Stop Missing Parts
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 Alexandria VA 22313-1450

*A copy of this notice **MUST** be returned with the reply.*

Office of Initial Patent Examination (571) 272-4000, or 1-800-PTO-9199, or 1-800-972-6382
 PART 2 - COPY TO BE RETURNED WITH RESPONSE